PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/898,365			ing Date 03/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FI	.ED NL	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1 16(a), (b), or (c))			N/A		N/A		N/A			N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1 16(o), (p),	E or (q))	N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•		X \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		*		X \$ =			X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	12/05/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	- 22	Minus	22	= 0	]	X \$ =		OR	X \$60=	0	
	Independent (37 CFR 1.16(h))	· 4	Minus	4	- 0	]	X \$ =		OR	X \$250=	0	
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**	-	]	X \$ =		OR	X \$ =		
	Independent (37 CFR 1.16(h))		Minus	***	-	I	x \$ =		OR	x s =		
	Application Size Fee (37 CFR 1:16(s))					l	<u> </u>		1			
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))						TOTAL		OR			
									OR	TOTAL ADD'L FEE		
***	*If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner:  *#Iffice 18 just himsels *Proviously Pack For it 11188 SPACE is less than 40, enter 3".  **If the *Highest Number Proviously Pack For it N THIS SPACE is less than 3, enter 3".											
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Interesting the internation is required by the control of the cont ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.